

**GREENWOOD COUNTY ASSESSOR'S OFFICE
REQUEST FOR PROPERTY SPLIT**

I _____,
Owner(s) of property

Request that the following property be split in accordance with the

Plat recorded in Plat Book: _____ Page: _____

Split will be for next year unless checked below:

Current tax year _____

Location: _____

Tax Map Number: _____

Reason for property split request: _____

I understand and agree that Greenwood County is splitting this property at my request. I also understand that doing this may affect my property taxes. If I ever choose to combine these parcels in the future, I will have to comply with all zoning regulations applicable at that time.

Signed: _____ Date: _____

Print Name(s): _____

Address: _____ Phone Number: _____

This request must be filed with the Assessor's office along with the plat.

Please return completed form to:

Greenwood County Assessor's Office

528 Monument St. Room 109

Greenwood, SC 29646

Phone #: (864) 942-8537

Fax: (864) 942-8660

Email: assessor@greenwoodsc.gov

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Planning Dept: _____ Date: _____